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PTO/SB/01 (12-97)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	39740-0008A
	First Named Inventor	Cobleigh, et al.
	COMPLETE IF KNOWN	
	Application Number	10/758,307
	Filing Date	01/14/04
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**GENE EXPRESSION MARKERS FOR BREAST CANCER PROGNOSIS**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

1/14/2004

as United States Application Number or PCT International

Application Number 10/758,307 and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/440,861	01/15/2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

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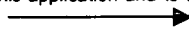
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## DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 25213 

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar  
Code Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.


Direct all correspondence to: ☒ Customer Number 25213 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))			Family Name or Surname		
MELODY A.			COBLEIGH		
Inventor's Signature					Date
Residence: City	Riverside	State	IL	Country	USA
Post Office Address	105 Michaux Road				
Post Office Address					
City	Riverside	State	IL	ZIP	60546
				Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

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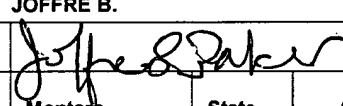
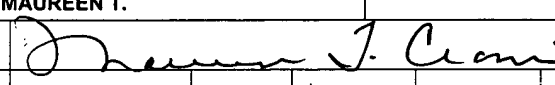
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
STEVE				SHAK			
Inventor's Signature						Date	
		3/23/04					
Residence: City	Hillsborough	State	CA	Country	US	Citizenship	US
Post Office Address		648 Fairway Circle					
Post Office Address							
City	Hillsborough	State	CA	ZIP	94010	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
JOFFRE B.				BAKER			
Inventor's Signature						Date	
		3/23/04					
City	Montara	State	CA	Country	US	Citizenship	US
Post Office Address		1400 Avery Street					
Post Office Address							
City	Montara	State	CA	ZIP	94037	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
MAUREEN T.				CRONIN			
Inventor's Signature						Date	
		3/23/04					
City	Los Altos	State	CA	Country	US	Citizenship	US
Post Office Address		771 Anderson Drive					
Post Office Address							
City	Los Altos	State	CA	ZIP	94024	Country	US

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OR

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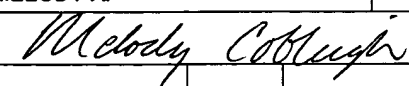
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Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

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MELODY A.			COBLEIGH				
Inventor's Signature					Date	5/21/04	
Residence: City	Riverside	State	IL	Country	US	Citizenship	US
Post Office Address	105 Michaux Road						
Post Office Address							
City	Riverside	State	IL	ZIP	60546	Country	US
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STEVE				SHAK			
Inventor's Signature						Date	
Residence: City	Hillsborough	State	CA	Country	US	Citizenship	US
Post Office Address		648 Fairway Circle					
Post Office Address							
City	Hillsborough	State	CA	ZIP	94010	Country	US
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
JOFFRE B.				BAKER			
Inventor's Signature						Date	
City	Montara	State	CA	Country	US	Citizenship	US
Post Office Address		1400 Avery Street					
Post Office Address							
City	Montara	State	CA	ZIP	94037	Country	US
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
MAUREEN T.				CRONIN			
Inventor's Signature						Date	
City	Los Altos	State	CA	Country	US	Citizenship	US
Post Office Address		771 Anderson Drive					
Post Office Address							
City	Los Altos	State	CA	ZIP	94024	Country	US

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